

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

For Official Use

IN THE MATTER OF THE GUARDIANSHIP OF

**Nomination of Guardian  
by Minor  
Age 14 and Older**

\_\_\_\_\_

\_\_\_\_\_ Date of Birth

Case No. \_\_\_\_\_

**I state:**

1. I am age 14 or over and the minor who is the subject of these proceedings.

2. My residence and post-office address are:

Residence: County of \_\_\_\_\_, State of \_\_\_\_\_

Post office address: \_\_\_\_\_

3. I nominate as guardian of my:

☐ person: (name) \_\_\_\_\_  
address: \_\_\_\_\_

☐ estate: (name) \_\_\_\_\_  
address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Minor

\_\_\_\_\_  
Name Printed or Typed

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

**Nomination made by minor in open court before:**

Name of Attorney

Address

Telephone Number

\_\_\_\_\_  
Circuit Court Judge/Court Commissioner

\_\_\_\_\_  
Name Printed or Typed

\_\_\_\_\_  
Date